

## CHROME DESTRUCT SYSTEM

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>CAD086510005</b>		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>Douglas Aircraft Co. 190 &amp; Normandie Ave Torrance, CA. 90502</b>				A. State Manifest Document Number <b>84351307</b>		B. State Generator's ID			
4. Generator's Phone <b>213-533-6677</b>		6. US EPA ID Number <b>CAD058018367</b>		C. State Transporter's ID <b>55649</b>		D. Transporter's Phone <b>513-348-3137</b>			
5. Transporter 1 Company Name <b>J. C. Liquid Waste Disposal</b>		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone			
7. Transporter 2 Company Name		10. US EPA ID Number <b>CAD020748125</b>		G. State Facility's ID <b>CAD020748125</b>		H. Facility's Phone			
9. Designated Facility Name and Site Address <b>CASMALIA P.O. Box E. NTU Road Casmalia, CA. 93429</b>				12. Containers		13. Total Quantity		14. Unit Wt/Vol	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				No.		Type		I. Waste No.	
a. <b>Waste alkaline liquid NOS corrosive NC 1719</b>				<b>001</b>		<b>TT</b>		<b>04500</b>	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above			
<b>Solid* 9% Magnesium Hydroxide 2%</b> <b>Water 91% Silicon Oxide 2%</b> <b>Chromic Hydroxide 25% Calcium Hydroxide 7%</b> <b>Aluminum Hydroxide 5%</b>						<b>08/14</b>			
15. Special Handling Instructions and Additional Information #60 <b>Use gloves, goggles, - May cause severe irritation to skin and eyes</b>									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.									
Printed/Typed Name <b>Donald C. Gerber</b>				Signature <i>Donald C. Gerber</i>		Date <b>9/3/85</b>		Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>Bill Spencer</i>		Date <b>9/3/85</b>		Month Day Year	
Printed/Typed Name <b>Bill Spencer</b>				Signature		Date		Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature		Date		Month Day Year	
Printed/Typed Name				Signature		Date		Month Day Year	
19. Discrepancy Indication Space <b>SCANNED</b>									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. #43997-331-20125									
Printed/Typed Name <b>Casmalia Resources</b>				Signature <i>Olivia Brown</i>		Date <b>9/3/85</b>		Month Day Year	

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3. Generator's Name and Mailing Address Douglas Aircraft Co. 190 & Normandie Ave Torrance, CA. 90502			A.State Manifest Document Number 84351307				
4. Generator's Phone (213-533-6677)			B.State Generator's ID				
5. Transporter 1 Company Name J. C. Liquid Waste Disposal			C.State Transporter's ID 53649				
6. US EPA ID Number C A D 0 5 8 0 1 8 3 6 7			D.Transporter's Phone 213-265-2131				
7. Transporter 2 Company Name			E.State Transporter's ID				
8. US EPA ID Number			F.Transporter's Phone				
9. Designated Facility Name and Site Address CASMALIA P.O. Box E. NTU Road Casmalia, CA. 93429			G.State Facility's ID				
10. US EPA ID Number C A D 0 2 0 7 4 8 1 2 5			H.Facility's Phone				
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
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Printed/Typed Name Donald C. Gerber			Signature <i>Donald C. Gerber</i>		Date Month Day Year 12 22 85		
17. Transporter 1 Acknowledgement or Receipt of Materials			Signature <i>Bill Speike</i>		Date Month Day Year 12 22 85		
Printed/Typed Name Bill Speike #641265			Signature		Date Month Day Year		
18. Transporter 2 Acknowledgement or Receipt of Materials			Signature		Date Month Day Year		
Printed/Typed Name			Signature		Date Month Day Year		
19. Discrepancy Indication Space SCANNED							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name			Signature		Date Month Day Year		